

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

For Official Use

Name:

Last

First

Middle
Name/Initial

Date of Birth:

**Juvenile Adjudication
and Prohibited
Possession Firearms
Cancellation Report
Wisconsin Department of
Justice Crime Information
Bureau**

When the court determines the original prohibition is cancelled:

Check all boxes that apply relating to *Juvenile Adjudication* and *Involuntary Commitment*.

CANCELLATION INFORMATION

***Juvenile Adjudication:* (Check all that apply)**

☐

A court has determined that the person is not likely to act in a manner dangerous to public safety and the right to possess firearms is restored [§941.29(8), WI Stats.].

Effective Date:

____ / ____ / ____
Month Day Year

Involuntary Commitment:

☐

A court has determined that there is no longer a substantial probability that the person may use a firearm to harm himself or herself or endanger public safety [§§51.20(13)(cv)2 and 51.20(16)(gm), WI Stats.].

Effective Date of Order:

____ / ____ / ____
Month Day Year

Submitted By – Name & Title

County

Date of Report (Month/Day/Century-Year)

Court ORI

Submit the one copy to: Crime Information Bureau, Attn: Handgun Hotline
P.O. Box 2718
Madison, WI 53701-2718 or

Email to: to: wihotline@doj.state.wi.us

Retain the original copy for your records. Should you have questions or require assistance call:
608/267-2776.